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Adjournment
2 Minute Drill:
Call to Join the PCPR Speakers Team

*Join the Roundtable’s Speakers Team and further knowledge sharing and partnership building!*

The Speakers Team is responsible for topics and content for roundtable. It identifies and invites speakers, with input from leadership team, and maintains the high level of quality of content.

**What do we want you to do?**

- **Use your ear to the ground** to identify and pull in emerging trends, new ideas, key issues, critical content areas, and high quality speakers.
- **Generate ideas and potential speakers** for upcoming HIMSS events and webinars as needed, HIMSS13 payer events like the networking luncheon.
- **Build** a successful, engaging, and beneficial roundtable!

**Contact**

Shelley Price, HIMSS / sprice@hимss.org | Nancy Devlin, HIMSS / ndevlin@hимss.org

Kim Harding, PCPR Speakers Team Co-Chair / Kimberly.Harding@floridablue.com / 904.905.6048

Lance Stewart PCPR Speakers Team Co-Chair / Lance.Stewart@emids.com / 615.638.2255
2 Minute Drill:

Call to Join the PCPR Communications Team

Do you like staying abreast of the latest health IT news in the payer community? Are you interested in furthering Payer-Provider collaboration, knowledge generation, and solution sharing? Would you like to continue the learnings and discussions from the HIMSS Patient-Centered Payer Roundtable (PCPR) monthly meetings with peers and industry leaders?

Join the Roundtable’s Communications Team and further the dialogue!

• **A CALL for Payer / Health plan blogs** – Be a HIMSS Payer guest blogger.
• **A CALL for Articles for the** – Author brief (300-750 words) news stories, thought pieces, and Roundtable recaps for the [HIMSS Payer Insider](#) (bi-monthly in the [Healthcare Payer News](#)).
• **Don’t let this opportunity pass you by! Get connected, lead the conversation, and be heard!**

Contact
Shelley Price, HIMSS / sprice@himss.org / 703-562-8846
Nancy Devlin, HIMSS / ndevlin@himss.org / 734-477-0857
Deanne Kasim, PCPR Communications Team Chair / dkasim@santesys.net / 301-926-8400
2 Minute Drill:

Election Healthcare Post Mortem
Agenda

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Adjournment
101 Part 2 – Completing the Plumbing: 
Interoperability, Meaningful Use, 
the Affordable Care Act, and S&I Framework

Jim St.Clair 
Senior Director, Interoperability and Standards, HIMSS
IT Implications from HITECH and the ACA

- HITECH
  - Health Information Exchange: data sharing, standardization, data analysis
  - “Meaningful Use”: Stage 1/Stage 2/ Stage 3?
    - Implementation of Certified EHR Technology
  - Revisions to HIPAA Security and Privacy
    - EFT/ERA and medical banking
IT Implications from HITECH and the ACA (cont’d)

• ACA
  – “Integrated Accountable Care”
    • ACOs and PCMHs
  – Health Insurance Marketplaces (HIMs)
  – Continued growth of electronic transactions
    • CAQH CORE
    • ACH/EFT/ERA
The Age of “Meaningful Use”

• Stage 1 (2011) – Focus on effective capturing and sharing of data, with providers demonstrating meaningful use.

• Stage 2 (2014) – Demonstrate health system improvement, with widespread adoption of data exchange and advanced care processes with decision support.

• Stage 3 (2015+/-) – Transform healthcare and population health through HIT, with improvements in care, efficiency, and population health, highlighting breakthrough examples of delivery and payment reform.
For Providers, A Busy Few Years...

- **2011**: Meaningful Use Phase I
- **2012**: 5010 Implementation (Jan 1)
- **2013**: Eligibility, Claim Status
- **2014**: Meaningful Use Phase II
- **2015**: ICD10 Implementation (Oct 1)
- **2016**: EFT, ERA
- **2015**: Claims, Enrollment, Premium, Referral, Authorizations
MU Objectives aligned by policy priorities

- Improving quality, safety, efficiency, and reducing health disparities
- Engage patients and families in their health care
- Ensure adequate privacy and security protections for personal health information
- Improve population and public health
- Improve care coordination
MU Stage 2 objective requirements

Eligible Providers (EPs):

16 Core Objectives

2 Menu Objectives (of 4)

24 CQM

Eligible Hospitals/Critical Access Hospitals (EH/CAHs):

17 Core Objectives

3 of 5 Menu Objectives (of 5)

12 CQM (Or PQRS)
The “Triple Aim”

• Improving the U.S. health care system requires simultaneous pursuit of three aims:
  – improving the experience of care,
  – improving the health of populations, and
  – reducing per capita costs of health care.

• Preconditions for this include
  – the enrollment of an identified population,
  – a commitment to universality for its members, and
  – the existence of an organization (an “integrator”) that accepts responsibility for all three aims for that population.

Source: http://content.healthaffairs.org/content/27/3/759.full.html
The “Triple Aim” (cont’d)

• The integrator’s role includes at least five components:
  – Partnership with individuals and families,
  – Redesign of primary care,
  – Population health management,
  – Financial management, and
  – Macro system integration.

Source: http://content.healthaffairs.org/content/27/3/759.full.html
Healthcare in 2014

• The role of the physician will change dramatically.
• Patients will (must!) be engaged in their care and “owning “ their information.
• ACOs will create winners and losers among providers.
• Transparency will empower consumers and motivate providers.
• Health system redesign— not just tinkering with payment models.
• An ounce of prevention is worth a pound of cure—and costs a lot less.
• Expect a significant change in transitions of site care and delivery mechanisms remote and virtual care will become the norm.
• Primary care will (should) be a major focus in the ACO environment.

Source: “Accountable Care Organizations: 10 Things You Need to Know About Accountable Care” – iHT2
Disruptive innovation trends

• Continued growth of retail care delivery
• Explosive growth of mobile devices and (less explosive) growth of telehealth
• Personal Health Records (PHRs)/“Health/Wealth” portals
• “Big Data”
What’s Needed Next: Electronic Business Transformation

• Electronic business transformation may be described as the art of matching the potential to automate workflows and business analytics with new, real time access to electronic health data, as a result of recent federal requirements around health data transactions and operating rules and their ongoing adoption in the marketplace.

• Creation and adoption of data standards for clinical and non-clinical information exchange
S&I Framework Overview

- An S&I Initiative focuses on a single challenge with a set of value-creating goals and outcomes, and the development of content, technical specifications and reusable tools and services.

- Leverage “government as a platform” – provide tools, coordination, and harmonization that will support interested parties as they develop solutions to interoperability and standards adoption.

- Call for Participation: The overall success of the S&I Framework is dependent upon volunteer experts from the healthcare industry and we welcome any interested party to get involved in S&I Framework Initiatives, participate in discussions and provide comments and feedback by joining the Wiki: [http://wiki.siframework.org](http://wiki.siframework.org)
Blue Button
Background

- Two years ago, the VA added a simple, easy to recognize “Blue Button” to their patient portal.

- Since then, the use of Blue Button has grown into a movement – a commitment by many of the country’s largest data holders, including the Federal government – to get personal health information out of proprietary silos and into the hands of the consumers who want a holistic picture of their health and health care.

- Several hundreds of thousands of veterans, members of the military, and Medicare beneficiaries have already downloaded their data through Blue Button.
Today, Blue Button means letting consumers download an ASCII file of their personal health information after they log onto the dataholder’s portal. For example:
Focus on patients & consumers accessing their own digital health data

- **Aim =** Identify a content standard for payor-generated Blue Button data
  - Practical
  - Human-readable
  - Machine-readable
  - **Capable of conveying both clinical and non-clinical** data
  - Data includes Blue Button offered today
  - Data includes EOB (Explanation of Benefits) data today

- **Goal = data & interoperability platform**
  - Feasible for payers & PBMs
  - Attractive to developers
  - Foundation to innovative apps & to create personally-controlled solutions
  - Not the solution itself – but should allow solutions to target clinical quality, **affordability**, access and the experience of care itself

Contacts: Pierce.Graham-Jones@hhs.gov & Henry.Wei@va.gov
You’re invited!
ABBI Payor Content Workgroup

- Open to the entire public & private Standards & Interoperability community
- Payor Workgroup Meetings are Fridays from 1:00 – 2:00 pm Eastern.
- “All-Hands” Community Meeting are on Wednesdays
- Meeting information is on the Automate Blue Button Wiki Page:
  http://wiki.siframe.org/Automate+Blue+Button+Initiative

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| **Content Sub WG**        |
| Weekly Meeting            | Mondays 4:00pm-5:00pm ET  |
| Next Meeting              | October 15                |
| Webex URL                 | https://siframe1.webex.com/ |
| Dial-in Information       | 1-408-600-3600             |
| Access Code               | 665 454 398               |
| Meeting Materials         | Meeting Materials         |

| **Pull Workgroup**        |
| Weekly Meeting            | Tuesdays 3:00pm-4:00pm ET |
| Next Meeting              | October 16                |
| Webex URL                 | https://siframe1.webex.com/ |
| Dial-in Information       | 1-408-600-3600             |
| Access Code               | 669 499 680               |
| Meeting Materials         | Meeting Materials         |

| **Payor Workgroup**       |
| Weekly Meeting            | Fridays 1:00pm-2:00pm ET  |
| Next Meeting              | October 12                |
| Webex URL                 | https://siframe1.webex.com/ |
| Dial-in Information       | 1-408-600-3600             |
| Access Code               | 669 369 182               |
| Meeting Materials         | Meeting Materials         |

Contacts: Pierce.Graham-Jones@hhs.gov & Henry.Wei@va.gov
Questions?

Jim St. Clair
Senior Director, Interoperability and Standards, HIMSS
(312) 915-9590
jstclair@himss.org
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Housekeeping

(Shelley Price)

Adjournment
Housekeeping

Resources atmhimss.org:

- Results from the inaugural Mobile Survey by HIMSS Analytics
- Participate in the second annual Mobile Survey sponsored by Qualcomm life.
- White Paper: Selecting a Mobile App: Evaluating the Usability of Medical Applications
- Leading Industry Newsletter
- The mHIMSS App; available on both Android and iOS.

Coming Soon! The mHIMSS Roadmap: A Guide to Mobile Integration
NEWS FROM THE mHEALTH SUMMIT

3 WEEKS UNTIL THE 2012 MHEALTH SUMMIT

AVOID LINES AND ONSITE PRICES!

2012 SUMMIT OFFERS STRONG FOCUS ON MOBILE STARTUP SPACE!

- Join StartUp Health Roundtable: The State of Innovation in Mobile Health on Monday 12/3 at 4:15 PM
- Sign up for Health 2.0 State of Change: Pioneers, Progress, and a 2013 Forecast on Sunday 12/2 at 1:00 PM
Housekeeping

• **Online Election for Board, Nominating Committee**
  - The annual election of the Board of Directors and Nominating Committee began **Oct. 15** and will run through **Nov. 15**. Please take this opportunity to vote at [https://www.directvote.net/himss/](https://www.directvote.net/himss/)

• **Board of Directors Candidates**
  Beverly Bell, RN, BS, MHA, CPHIMS, FHIMSS
  Carl Dvorak, FHIMSS
  Elizabeth (Beth) Halley, RN, MBA, FHIMSS
  Alfred Hamilton, PhD, FHIMSS
  Lesley D. King, MA, FHIMSS
  Cynthia A. Peterson
  John R. (Rick) Schooler, MBA, FCHIME, FACHE, FHIMSS
  Ferdinand T. Velasco, MD, FHIMSS
  Michael H. Zaroukian, MD, PhD, FACP, FHIMSS

• **Nominating Committee Candidates**
  Melinda Costin, CHCIO, FHIMSS
  Linda Harrington, PhD, RN-BC, CNS, CPHQ, CENP, CPHIMS, FHIMSS
  Laura L. Kolkman, RN, MS, FHIMSS
  Shawna Schueller, FHIMSS
  Dana Sellers
  Tim Moore, RN, CIO
  Barbara S. Riddell, MHA, MSN, PMP, CHCIO
Wrap-up

• Resources:
  – HIMSS Calendar of Events:
  – Webinars and Audio Conferences
Wrap-up

• Web page
  – Payer Topics and Tools page!
    – http://www.himss.org/ASP/topics_payers_healthplans.asp
  – http://www.healthcarepayernews.com/himss-payer-insider

• Next meeting
  – 3rd Thursday of the month from 4-5pm EST
    • Thursday, December 20, 2012
FY13 Leadership and Contact Information

**Chairperson:**
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**Vice Chairperson:**
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